



Official Entry Form
COLLIE CLUB OF CANADA
ALL-BREED OBEDIENCE AND RALLY TRIALS
 ENTRIES CLOSE 10:00 P.M. WEDNESDAY NOVEMBER 13, 2019
 PLEASE PRINT OR TYPE CLEARLY



SATURDAY NOVEMBER 30, 2019	SUNDAY, DECEMBER 1, 2019
<input type="checkbox"/> Obedience Trial 1 <input type="checkbox"/> Rally Trial 1	<input type="checkbox"/> Obedience Trial 2 <input type="checkbox"/> Rally Trial 2

Entry Fees: _____ Listing Fees: _____ Unofficial Class: _____ Catalogue: _____ Total: _____

Breed (& Variety): _____	Sex: _____
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Enter in the following classes

<p>OBEDIENCE</p> <input type="checkbox"/> Pre-Novice <input type="checkbox"/> Utility A <input type="checkbox"/> Novice A <input type="checkbox"/> Utility B <input type="checkbox"/> Novice B <input type="checkbox"/> Novice C <input type="checkbox"/> Open HA <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Open HB <input type="checkbox"/> Veterans <input type="checkbox"/> Open 18A <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Open 18B <input type="checkbox"/> Parade of Titleholders <input type="checkbox"/> Parade of Veterans Obedience Jumps: Height: _____ Width: _____	<p>RALLY</p> <input type="checkbox"/> Novice A <input type="checkbox"/> Advanced B <input type="checkbox"/> Novice B <input type="checkbox"/> Excellent A <input type="checkbox"/> Intermediate <input type="checkbox"/> Excellent B <input type="checkbox"/> Advanced A <input type="checkbox"/> Master <input type="checkbox"/> Team Level: _____ Rally Jump Heights <input type="checkbox"/> Under 10" (6"/12") <input type="checkbox"/> 10" and under 15" (8"/16") <input type="checkbox"/> 15" and under 20" (12"/24") <input type="checkbox"/> 20" and over (16"/32")
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Registered Name: _____

Registration Number <input type="checkbox"/> CKC Reg <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC Misc <input type="checkbox"/> CKC CCN # <input type="checkbox"/> Listed	Enter number here	Date Birth M: ___ D: ___ Y: ___ Is this a Puppy? _____	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere
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Breeder(s): _____

Sire: _____

Dam : _____

Owner(s): _____

Address: _____

City: _____ Province: _____ Code: _____

Owner's Agent (if any): _____

Address: _____

City: _____ Province: _____ Code: _____

E-Mail Entry ID & Schedule to: _____

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry. In consideration of the acceptance of this entry I (we) agree to be bound by the rules and regulations of the Canadian Kennel Club and by any additional rules and regulations appearing in the premium list. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

Signature _____

Phone Number _____